## PART B - FEE(S) TRANSMITTAL

Complete and sand this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

(703) 746-4000 or Fax

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 4 should be completed where

appropriate. All further comindicated unless corrected by maintenance fee notification	respondence including the P below or directed otherwise : s.	atent, advance orders in Block 1, by (a) spe	and notification of cifying a new co	of maintenance fees v rrespondence address	will be mailed to the current; and/or (b) indicating a sepa	correspondence address as trate "FEE ADDRESS" for
CURRENT CORRESPONDENCE ADDRESS (Note: Legibly mark-up with any corrections or use Block 1)  909 7590 04/12/2004				Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.		
PILLSBURY WINTHROP, LLP P.O. BOX 10500 MCLEAN, VA 22102				Certificate of Mailing or Transmission  I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO, on the date indicated below.		
						(Depositor's name)
						(Signature)
!						(Date)
_ APPLICATION NO.	FILING DATE	FIRST	NAMED INVEN	TOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/050,041	01/17/2002	Frank Auer			P 284994 P-0226.010-US	1218
TITLE OF INVENTION: LI	THOGRAPHIC APPARATI	JS, DEVICE MANUF.	ACTURING ME	THOD, AND DEVIC	E <del>Manufacturing</del> The Manufa cture o	REBY
APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PU	BLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1330	•	\$300	\$1630	07/12/2004
EXAMINER		ART UNIT	CL	ASS-SUBCLASS	າ	
MATHEWS, ALAN A		2851		355-053000	J	
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).			2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or 1 PILLSBURY WINTHROP L.			
Address form PTO/SB/12	•	orrespondence ag	agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent			
☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			attorneys or agents. If no name is listed, no name will be printed.			
PLEASE NOTE: Unless	to the USPIO or is being st	ow, no assignee data w ibmitted under separate	ill appear on the cover. Completi	patent. Inclusion of a on of this form is NO	ssignee data is only appropria Γ a substitute for filing an assi	ate when an assignment has gnment.
(A) NAME OF ASSIGNEE  (B) RESIDENCE: (CITY and STATE OR COUNTRY)  Veldhoven, The Netherlands						
Please check the appropriate	assignee category or categor	ies (will not be printed	on the patent):	🔾 individual 🛚 🗸	corporation or other private gr	oup entity
4a. The following fee(s) are			ment of Fee(s):		gerperation of outer private gr	oup change — government
■ Issue Fee □ A check in the amount of the fee(s) is enclosed.						
Advance Order - # of Copies 3 (\$9.00)  Payment by credit card. Form PTO-2038 is attached.  O81468-0284994  The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 3-3975 (enclose an extra copy of this form).						
Advance Order - # of 0	Copies 3 (49.00)	Dep	he Director is he osit Account Nun	reby authorized by classes and authorized by classes and authorized by classes are supported by the cla	harge the required fee(s), or (enclose an extra c	credit any overpayment, to opy of this form).
Director for Patents is reques	sted to apply the Issue Fee and	d Publication Fee (if ar	y) or to re-apply	any previously paid is	ssue fee to the application ide	ntified above.
(Authorized Signature)	n-1 7861	(Date) 7/2/	04			
Emily T. Bell, Reg. No. 47418				67/07/2004 b	CAVACTO AAAAAAAA ADDO	TE 488788/4
NOTE; The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.				07/07/2004 BSAYASI2 00000090 033975 10050041 01 FC:1501 1330.00 DA		
This collection of informat obtain or retain a benefit happlication. Confidentiality estimated to take 12 minut completed application for case. Any comments on suggestions for reducing the Patent and Trademark C 22313-1450. DO NOT S SEND TO: Commissioner 1	n is required to to process) and is collection is submitting the the individual is form and/or n Officer, U.S. ddria, Virginia IS ADDRESS.	02 FC:1504 03 FC:8001	300.00 DA 9.00 DA			

TRANSMIT THIS FORM WITH FEE(S)

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.